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Effective on 12/08/2004.  
Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEES TRANSMITTAL

## For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ ) **180.00**

Complete if Known

Application Number	10/766,948-Conf. #2491
Filing Date	January 30, 2004
First Named Inventor	Helena GYBACK
Examiner Name	Z. C. Tucker
Art Unit	1624
Attorney Docket No.	5999-0524PUS3

### METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number: <u>02-2448</u>	Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Rcissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Small Entity	
Fee (\$)	Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
<u>107</u>	- <u>107</u>	<u>x</u> = <u>_____</u>	<u>_____</u>	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
<u>6</u>	- <u>6</u>	<u>x</u> = <u>_____</u>	<u>_____</u>

HP = highest number of independent claims paid for, if greater than 3.

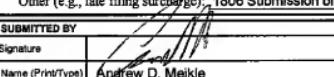
#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>100</u>	- <u>100</u>	/50 = <u>_____</u> (round up to a whole number) x <u>_____</u> = <u>_____</u>	<u>_____</u>	<u>Fee Paid (\$)</u>

**4. OTHER FEE(S)**

Non-English Specification	\$130 fee (no small entity discount)	Fee Paid (\$)
Other (e.g., late filing surcharge)	180.00 Submission of an Information Disclosure Statement	180.00

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature		32,868	(703) 205-8000
Name (Print/Type)		Date	
Andrew D. Meikle		June 6, 2007	